



D20. Safeguarding Adults at Risk Policy

1. Introduction

- 1.1 The Hope Hub (THH) is a charitable incorporated organisation (CIO) and is registered with the Charities Commission under charity number 1176452. It is governed by a Board of Trustees (“The Board”) subject to the Legal Constitution. It operates an open access day hub in Camberley for adults, aged over 18, disadvantaged by homelessness, at risk of homelessness, mental health illness, addiction, financial hardship, unemployment or other social deprivation. THH aims to reduce social isolation, enable change and improve our service users’ quality of life. THH aims to provide a safe and caring environment for its service users and any adults at risk including volunteers. This policy sets out how we intend to achieve such an environment.
- 1.2 The characteristics of adult abuse can take a number of forms and cause victims to suffer pain, fear and distress extending far beyond the occasion of the actual incident or incidents. Victims may be too afraid or embarrassed to raise any complaint. They may be reluctant to discuss their concerns with other people or unsure who to trust or approach with their worries.
- 1.3 There may be circumstances in which victims are unaware that they are being abused or may have difficulty in communicating this information to others.

2. Policy Objective

- 2.1 The aim of this policy is to ensure the safety of adults at risk by outlining clear procedures and ensuring that all staff members and volunteers are clear about their responsibilities and know how to report any concerns.

3. Principles of Best Practice

- 3.1 We shall promote the general welfare, health, well-being and development of adults at risk and take every reasonable precaution to minimise risk whilst providing opportunities for their development.
- 3.2 We shall ensure that all members of staff and volunteers are aware of and act in accordance with their personal responsibilities.
- 3.3 We shall provide members of staff and volunteers with clear roles and responsibilities and ensure that they are suitable for that role.
- 3.4 We shall provide appropriate support, training and protection for all members of staff, volunteers and our service users.

- 3.5 We shall protect, maintain and uphold the human rights of our service users.
- 3.6 We shall eliminate prejudicial discrimination in THH including sectarian, racial, sexual/gender, or any other discrimination based on, for example, physical or mental disabilities.
- 3.7 We shall take steps to avoid bullying or exploitation whenever or wherever it may be found.
- 3.8 We shall ensure that all members of staff and volunteers are familiar with and have access to a current version of this policy. This will include displaying a hard copy of this policy in a visible staff/volunteer location at all times.
- 3.9 We shall seek to ensure our service users, members of staff and volunteers know how to voice their concerns and obtain help if they are unhappy or worried about anything.
- 3.10 We shall ensure that our service users, members of staff and volunteers are encouraged to report any alleged malpractice, illegal acts or omissions (“whistle blowing”). The policy for dealing with any such whistle blowing is contained in a distinct and separate policy. That policy shall include an effective procedure for responding to such complaints, concerns and allegations.
- 3.11 We shall ensure that our service users and members of staff are aware of their responsibilities and how to record and report their concerns.
- 3.12 We will provide guidance to any service user who feels that they have been treated in an inappropriate manner contrary to this policy and ensure that they are encouraged to see that their concerns are documented and dealt with expeditiously.
- 3.13 We shall ensure that there is appropriate documentation for completion when recording any incident in contravention of this policy.
- 3.14 We shall ensure that appropriate and proportionate recruitment procedures are in place when taking on new members of staff and volunteers, that DBS checks are taken up for every member of staff or volunteer before they are allowed to work, without supervision, with our service users.
- 3.15 We shall monitor this policy and take:
- 3.15.1 Any measures necessary to ensure compliance with new legislative requirements; and
 - 3.15.2 Any measures that it is apparent are necessary to strengthen and improve existing practice.

4. Definitions

4.1 A statutory definition of an adult at risk (vulnerable adult) is found in the 2006 Safeguarding Vulnerable Groups Act (c.47) at s59. A similar but less comprehensive definition is found in the 2000 Care Standards Act (c.14) at s80(6). However, these statutory definitions are not entirely appropriate within this policy document – they do not encompass, for example, the homeless but the 2006 definition does include those detained in custody. For the purposes of this policy we shall adjust the SVGA definition to: An adult at risk (otherwise vulnerable) is construed as a person aged 18 years or over who may be unable to take care of themselves or protect themselves from harm or from being exploited. This may include, but is not limited to, a person who:

4.1.1 Is elderly and frail;

4.1.2 Has a mental illness including dementia;

4.1.3 Has a physical or sensory disability;

4.1.4 Has a learning disability;

4.1.5 Has a severe physical illness;

4.1.6 Is a substance misuser;

4.1.7 Is homeless. This category shall not be limited to those who are 'rough sleepers', others who qualify under this category would include so-called 'sofa-surfers', or indeed any person who may be classified as having no fixed abode;

4.1.8 Is living in sheltered housing;

4.1.9 Is receiving domiciliary care in their own home;

4.1.10 Is under the supervision of the probation services;

4.1.11 Is receiving a welfare service defined as the provision of support, assistance, or advice by any person, the purpose of which is to develop an individual's capacity to live independently in accommodation or support their capacity to do so;

4.1.12 Is an expectant or nursing mother or any other form of single parent living in residential care; or

4.1.13 Is receiving direct payments from a local authority or health and social care trust in lieu of social care services.

4.2 **Abuse** is a violation of the individual's human and civil rights by any other person or persons. Abuse therefore includes behaviour prejudicial to the victim's status or autonomy. Such abuse may take a number of forms; amongst those are included, but not limited to:

4.2.1 Physical abuse, for example - hitting, pushing, shaking, inappropriate restraint, force-feeding, forcible administration of medication, neglect or abandonment;

4.2.2 Sexual abuse, for example - involvement in any sexual activity against their will, exposure to pornography, voyeurism and exhibitionism;

4.2.3 Emotional or psychological abuse, for example - intimidation or humiliation;

4.2.4 Financial or material abuse, for example - theft or exerting improper pressure to sign over money or other rights in property from pensions, savings, or other valuable assets;

4.2.5 Neglect or acts of omission, for example - being left in wet or soiled clothing, or malnutrition;

4.2.6 Discriminatory abuse for example - racial, sexual or religious harassment;

- 4.2.7 Personal exploitation this involves denying an individual's rights or forcing them to perform tasks that are against their will;
 - 4.2.8 Violation of rights, for example - preventing an individual freely expressing their thoughts and opinions;
 - 4.2.9 Institutional abuse, for example - a failure to ensure the individual's privacy or dignity; or
 - 4.2.10 A combination of any of the above.
- 4.3 There are specific types of forms of behaviour that are abusive and may result in harm. These include, but are not limited to:
- 4.3.1 Bullying; Mate or Hate Crime;
 - 4.3.2 Domestic Violence;
 - 4.3.3 Drugs alcohol and substance abuse;
 - 4.3.4 Self-harm; and
 - 4.3.5 Misuse of information technology (including, for example 'trolling').

5. Responsibilities of Volunteers and Staff

- 5.1 They must understand and apply this policy.
- 5.2 They must, at all times, act appropriately and respectfully challenge inappropriate behaviour in others – including staff, volunteers, and service users.
- 5.3 Be able to recognise harm.
- 5.4 Know how to report any concerns.

6. Reporting Procedures

- 6.1 If the allegation or suspicion of abuse is discovered by a member of staff, or a volunteer then they should inform a senior member of staff or an appropriate member of the Board of Trustees ("The Board") as soon as possible. If the member of staff or volunteer considers that their concerns are not being addressed appropriately then they should report their original concern to the Chair of Trustees. It is the direct personal responsibility of the Chair to ensure that any such allegation drawn to their attention is properly, expeditiously, and appropriately investigated and to inform the complainant of the outcome of any such investigation.
- 6.2 The member of staff or volunteer should make a written record of the allegation or suspicion of abuse (see appendix 1) and discuss the situation with a senior member of staff or a Trustee (this may include the Chair in accordance with s5.1). A risk assessment should be carried out, in any instance in which there is a suspicion of an Institutional Failure then the Chair or Board of Trustees should contact the Surrey Heath Borough Council on 01276 707100 Customer Contact Centre in the first instance (Open Monday – Thursday 8.30am – 5.00pm and Friday 8.30am – 4.30pm and 24 hr emergency line]) for assistance in dealing with the matter.

- 6.3 If a staff member or volunteer has been told about the allegation of abuse in confidence, they should attempt to gain the consent of the service user to make a referral to another agency. However, the gaining of the consent is not essential in order for information to be passed on although the decision to breach confidentiality must be taken by the Chief Executive Officer (CEO), after consultation with the Chair of Trustees (see Confidentiality Policy).
- 6.4 When, under sections 6.1 to 6.3 an allegation is being raised these following matters should be taken into consideration:
- 6.4.1 The scale of the abuse;
 - 6.4.2 The risk of harm to others; and
 - 6.4.3 The capacity of the individual to understand the issues of abuse and consent.
- 6.5 In general, disclosure without consent cannot be made. However, there are circumstances where information can be disclosed. These are described in detail in the Confidentiality Policy and fall under the headings of:
- 6.5.1 Acting in the best interest of the service user; or
 - 6.5.2 Co-operating with the police or other law enforcement agencies.
- 6.6 In emergency situations (e.g. where there is the risk or occurrence of severe physical injury), where immediate action is needed to safeguard the health or safety of the individual or anyone else who may be at risk, the emergency services must be contacted.

7. Outcome

- 7.1 If, after investigation, the concern is proven to have been well founded then the necessary steps will be taken to prevent any further recurrence.
- 7.2 Where there is no case to answer but the individual who made the report acted in good faith, the investigator shall take steps to ensure that the individual suffers no adverse consequences of their action.
- 7.3 Where allegations are proven false and to have been made maliciously, it may be necessary to take action against the individual who made the report.
- 7.4 In all instances the investigator will arrange a meeting with the individual who made the report to give appropriate feedback on the outcome of the investigation. This will be appropriately recorded.

8. Responsibilities

- 8.1 All members of staff and volunteers have a responsibility to be aware of this policy and to report any suspicions that they might have concerning adult abuse.

8.2 All members of The Board of Trustees and Senior Staff have the responsibility to ensure that any allegation falling within the scope of this policy is properly investigated.

9. DBS Checks

9.1 All members of staff will be subject to an enhanced DBS check.

9.2 Any volunteer working in an unsupervised position with service users will be subject to the appropriate DBS check.

9.3 All DBS checks will be reviewed by a senior member of staff. Where a concern is raised by such a disclosure appropriate action will be taken. Such action will normally be a termination of the connection between THH and the person concerned.

10. Legislation

10.1 This policy is informed by, and adheres, to the Barnsley Multi-Agency Adult Protection Policy and Procedures, for further reference this may be consulted at:

<http://barnsleymbc.moderngov.co.uk/documents/s8823/Barnsleys%20Framework%20for%20Safeguarding%20Children%20and%20Adults.pdf>

A printed copy of Surrey Heath Borough Council Safeguarding Adults Policy is also contained within the Staff Policies and Procedures and can be found on their website at www.surreyheath.gov.uk If, in any doubt, Surrey Heath Borough Council Customer Contact Centre can be contacted on 01276 707100 in the first instance (Open Monday – Thursday 8.30am – 5.00pm and Friday 8.30am – 4.30pm and 24 hr emergency line) for assistance in dealing with the matter.

10.2 THH is a registered charitable incorporated organisation (CIO). It does not discharge duties of a public nature. Its' decisions are not therefore susceptible to judicial review or remedy at public law. However, in respect of the rights of the individual we shall act mindful of those rights protected by the following International Statutes:

10.2.1 The European Convention for the Protection of Human Rights and Fundamental Freedoms (The "ECHR") [Council of Europe, 1950] together with the applicable protocols. (Protocols 1 [1963], 7 [1984], 12 [2000]);

10.2.2 The European Social Charter (Revised) [Council of Europe, 1996];

10.2.3 The International Convention on the Elimination of all Forms of Racial Discrimination [UN 1966];

10.2.4 The International Covenant on Civil and Political Rights (The "ICCPR") [UN 1966]; and

10.2.5 The Convention on the Elimination of all Forms of Discrimination against Women [UN 1979].

10.3 THH takes cognisance of the domestic legal framework within which it operates. In respect of this policy document it is cognisant of:

- 10.3.1 The 1998 Public Interest Disclosure Act (c.23) – with respect to ‘whistle blowing’.
- 10.3.2 Care Standards Act (2000) c14 s83 – with respect to the necessity to notify the Secretary of State. In this matter, we will interpret the statute so as to consider a volunteer as falling within the category of a ‘worker’.
- 10.4 For the reasons discussed in s4.1 (*supra*) the definitions found in the Safeguarding Adults at risk can be found within the Vulnerable Groups Act 2017 and the 2000 Care Standards Act of ‘vulnerable adults’ are merely persuasive when considered in relation to THH.

11. Policy Validity and Review

This document represents our policy in respect of the Protection of Adults at risk. It has been reviewed and agreed by the Trustees and the CEO. This policy will be reviewed by the due date shown on the footer.

Appendix 1



Protection of Adults at Risk Incident Report Form

Name:

Contact Number:

Briefly describe what happened (include times and dates):

Names and contacts of any witnesses:

Name of person completing form:

Date:

Responsible Manager/CEO/Chair of Trustees (delete as appropriate) responsible for investigation:

Date:

Action taken: